

DOCUMENT # P99000099814

Entity Name: SUANA IMPORT & EXPORT, INC

FILED
Jul 11, 2000 8:00 am
Secretary of State

07-11-2000 90002 020 ***150.00

Principal Place of Business: 1995 W. COMMERCIAL BLVD, C
FORT LAUDERDALE, FL 33319

Principal Place of Business: 1995 W COMMERCIAL BLVD
Suite, Apt. #, etc. C

City & State: FT LAUDERDALE, FL
Zip: 33319 Country: USA

4. FFL Number: 05-0964695
5. Certificate of Status: Demand ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent:
OFFICE - NDFIL - PA
3284 N. STATE ROAD 7
LAUDERDALE LAKES, FL 33319

7. Name and Address of New Registered Agent:
Name: _____
Street Address (P.O. Box Number is Not Acceptable): _____
City: _____ FL Zip Code: _____

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Signature: [Signature] 5/1/00
Signature, typed or printed name of registered agent and title if applicable: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS	
☐ Delete	
☐ Delete	
☐ Delete	
☐ Delete	
☐ Delete	
☐ Delete	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
☐ Change ☐ Addition	
☐ Change ☐ Addition	
☐ Change ☐ Addition	
☐ Change ☐ Addition	
☐ Change ☐ Addition	
☐ Change ☐ Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered in executing this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] VP 5/1/00 954845533